



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 750

Date Received

2003 DEC -2 AM 11:38
22 SEP 2003

Repository ☐

Reference No.
10040258

OWNER INFORMATION (Type or Print)

Name

Address

City

LIVONIA

State

MI

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorized signature, provide your name or address to the vehicle manufacturer.
Signature of Owner [Signature] Date 11/11/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at operators of vehicle or on vehicle's title

1FALP534XSG293359

Make

FORD

Model

TAURUS

Model Year

1995

Date Purchased

Dealer's Name and Telephone Number

Engine:

No. Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

180000 VEHICLE SPEED CONTROL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

01-SEP-2002

Failure Mileage

23600

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTWAL9ABC038)

☐ Original Equipment
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

SPEEDOMETER NO LONGER SHOWS THE ACTUAL SPEED DRIVEN, NEEDLE JUMPS AROUND, COMPONENT WAS REPLACED AT DEALERSHIP.*AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.